2583901658

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

CUCEIVED FEC MAIL OPERATIONS CENTER

2006 MAP -6 A 8 17

Office use only

NAME OF COMMITTEE (in full)		(Check if name is changed)	Example: If typying, ty over the lines	12FE4M		
Jobs, Economy and Bud	iget Fu	iηd (JEB FUND)	11111			
<u> </u>		<u> </u>			بنبيب	
ADDRESS (number and street)	PO	Box 40385		<u> </u>	.1-1-1-1-1	التنب
(Check if address is changed)		shington		<u> </u>	20016	_
	LI	<u></u>				
COMMITTEE'S E-MAIL ADDRES	SS		CITY	STATE	ZIP CO	DE 📥
N/A	1.1.1				<u> </u>	لىسى
<u> </u>		<u> </u>		<u> </u>	<u> </u>	
COMMITTEE'S WEB PAGE ADD	DŘÉŠŠ :	(URL)		214		·
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COMMITTEE'S FAX NUMBER 7034258352	. •	A part of the second	TOP (1.12) (1.53) server and a	Marie Marie Market Marie Marie		
ا تنا السادة	<u>-1, 1</u>		The second secon	***	e e e e e e e e e e e e e e e e e e e	
2. DATE M M / D 2	4	2006 V			•	
3. FEC IDENTIFICATION NUI	MBER		C	wgwa kaugaran		
4. IS THIS STATEMENT	j NE	EW (N) OR	AMENDED) (A)		
I certify that I have examined this Stat	toment as	ed to the best of my know	dedge and belief it is true, cou	rect and complete		
Certify that I have examined the State	Billion Car	1				
Type or Print Name of Treasurer	1	Christopher J. W	lard			
Signature of Treasurer Electer	nically.	Hed by Christoph	er J. Ward	Date [DE 24	2006
No.		<u> </u>		<u> </u>		
NOTE: Submission of false, erroneou			subject the person signing thi TION SHOULD BE REP			'g.
Office Use Only			For further Infor Federal Election Toll Free 800-42- Local 202-894-11	Commission 4-9530	FEC FC	
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	₩, -,		rent in the second of the	en e		. •

5.	TYPE OF COL	MMITTEE (Check One)					
	(a) (a)	This committee is a principal campaign committee. (Complete the candidate information below.)					
	(6)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
	Name of Candidate	<u> 1 1 1 1 1 1 1 1 1 1</u>					
	Candidate Party Affiliatio	Office State State State State District					
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate	<u> </u>					
	(d)	(National, State (Democratic, This committee is a (or subordinate) committee of the Republican, etc.)	²arty.				
	اتاً	This committee is a congrete coaronated fund					
	(e)	This committee is a separate segregated fund					
	(f) X This committee supports/opposes more than one Federal candidate, and Is NOT a separate segregated fund or party committee.						
6.	Name of Am	ny Connected Organization or Affiliated Committee					
ļ	None		<u> </u>				
ī							
_	_1 _3 _1 _1		1				
	Mailing Addr	ress <u> </u>	· · · · · ·				
		<u>. </u>	<u>l</u> L				
		· <u> </u>					
		CITY▲ STATE A ZIP CODE ▲					
	Relationship	P 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	Type of Con	nnected Organization:					
	Con	rporation Corporation w/o Capital Stock Labor Organization					

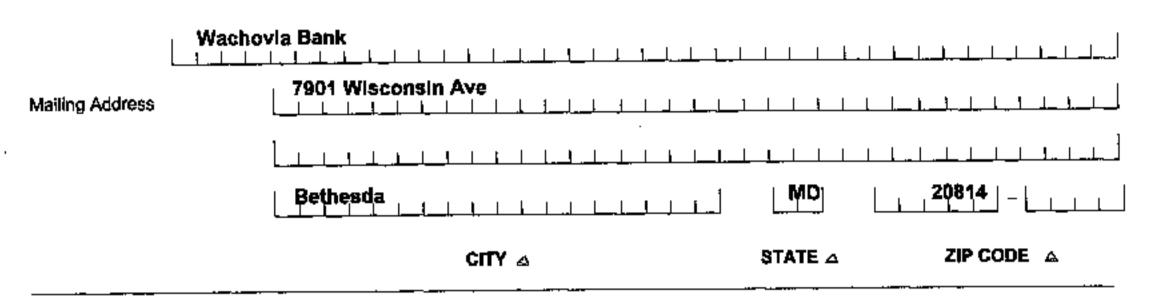
	L. Mei	embership Organization Trade Association Cooperative					

FEC Form 1 (Revised		. <u> </u>	Page 3
ite or Type Committee Nam			
	udget Fund (JEB FUND)		
Custodian of Records: Repossession of Committee	dentify by name, address, (phone number o e books and records.	ptional), and position of the	e person in
Full Name Chris	topher J. Ward	<u> </u>	<u> </u>
Mailing Address	6302 Massachusetts Ave	6302 Massachusetts Ave	
•	Bethesda		20816 _
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE A
Treasure	er en	•	
		Telephone number	
name and address of ar	ne and address (phone number optional) of ny designated agent (e.g., assistant treasurer) stopher J. Ward	the treasurer of the commi	ttee; and the
name and address of ar	ne and address (phone number optional) of ny designated agent (e.g., assistant treasurer)	the treasurer of the commi	ttee; and the
name and address of ar Full Name of Treasurer Chris	ne and address (phone number optional) of ny designated agent (e.g., assistant treasurer) stopher J. Ward	the treasurer of the commi	ttee; and the
name and address of ar Full Name of Treasurer Chris	ne and address (phone number optional) of ny designated agent (e.g., assistant treasurer) stopher J. Ward 6302 Massachusetts Ave	the treasurer of the commi	
name and address of ar Full Name of Treasurer Chris Mailing Address	ne and address (phone number optional) of my designated agent (e.g., assistant treasurer) stopher J. Ward 6302 Massachusetts Ave Bethesda	the treasurer of the commi	20816

Full Name of Designated Agent			
Mailing Address		<u></u>	
Title or Position♥	CITY	STATE	ZIP CODE A
		Telephone number	. -

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.



(3/2005)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered** Postmarked **USPS First Class Mail** 227-06 Postmarked (R/C) **USPS** Registered/Certified Postmarked USPS Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark Shipping Date Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): 3-6-06 DATE PREPARED PREPARER